COLORADO DEPARTMENT OF TRANSPORTATION ACQUISITION STAGE RELOCATION PLAN				Project Code	ect Code Parcel No.		
				Project No.			
☐ Original ☐ Amendment				Location			
1. Are there any other Federal, State or community programs affecting the availability of housing, which are currently in operation?   No Yes, give details							
2. Are any significant problems expected in relocating the displaced person(s)?  No Yes, give details							
What are the problems and what methods will be used to resolve them?							
3. How much lead time is needed? Days Is this adequate to carry out a timely, orderly and humane relocation?   No Yes							
4. Does the number of displaced persons warrant a local subsidiary office on the project?   No Yes							
5. Is there a need for services for interpretive non-English language proficient owner(s)/tenant(s)?  No Yes If yes, what language(s)?							
<b>6a.</b> Owner occupied dwelling units being acquired <b>6b.</b> Te				enant occupied dwelling units being acquired			
Value level	# of families	# of persons	Rent le	evel	# of fam	nilies	# of persons
Below \$150,000			Below	\$750			
\$150,000 to \$300,000			\$750 t	o \$1,500			
Over \$300,000			Over 9	61,500			
Total				Total			
6c. Number of businesses affected by project 6d. Number of nonpr					organizatio	ons affec	ted by project
6e. Number of farms affected by project							
Based on information from the Displaced Person(s) Information (Form #558), evaluate the needs of all persons displaced and correlate with Section 7 (below).							
7a. Available housing for sale 7b. Available rental units							
Value level	# of units			Rent level	#		units
Below \$150,000			Belov	v \$750			
\$150,000 to \$300,000			\$750	to \$1,500			
Over \$300,000			Over	\$1,500			
Total				Total			
7c. Number of available business locations 7d. Num				er of available nonprofit organizations locations			
7e. Number of available farm locations							
8. Number of ownerships with only personal property within the acquisition parcels							
Additional information (indicate the items for which information is being supplied)							
Displayed by:							
Prepared by:				Date			
Reviewed by (Region ROW Mgr/Supervisor):				Date			
Approved by ROW Program Manager:				Date			